

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address).	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA <input type="checkbox"/> 800 SOUTH VICTORIA AVE, VENTURA CA. 93009 <input type="checkbox"/> 3855 - F ALAMO ST. SIMI VALLEY, CA. 93063-2110		
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:		
AFFIDAVIT/CERTIFICATE/ DECLARATION FOR SUBPOENA DUCES TECUM RE: DEPOSITION		CASE NUMBER:

The undersigned states: That he is attorney of record for Plaintiff/Defendant in the above entitled action; that the deposition of _____ is noticed for hearing before _____ at _____ in Room No. _____, _____ (Street Address) City of _____, County of _____, State of California, on date _____.

That _____ has in his possession or under his control the following documents:
(Designate and Name the Exact Things to be Produced)

That good cause exists for the production of the above described matters and things for the following reasons:

That the above documents are material to the proper presentation of his case by reason of the following facts: (State the materiality to the issues involved)

WHEREFORE request is made the Subpoena Duces Tecum issue.

Dated: _____

Signature

Subscribed and sworn to before me

_____, _____

Notary Public
(seal)

Dated: _____

at _____

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

(Signature)